



**CANDIDATE  
POLITICAL INQUIRY FORM  
KCBS  
LOS ANGELES, CA**

**Federal**

Special Election: ☐

Primary Window: ☐

General Election

**X**

Out of Window: ☐

RECORD OF REQUEST: Broadcast Time/Flight Dates:

4Q '12

NAME OF REQUESTOR:

Sarah Linden

1. NAME OF AD AGENCY:

**Smart Media Group**

814 King St Ste 400

Alexandria, VA 22314

703.518.4747

2. ORGANIZATION PAYING FOR TIME:

**Bloomfield For Congress**

909 N. Aviation Blvd, Ste 9

Manhattan Beach, CA 90266

310.513.5033

Treasurer: Bryan Burch

3. ORGANIZATION PROVIDING COMMERCIAL

Same as Item 1

4. BROADCAST TO FAVOR ISSUE/BALLOT/CANDIDATE:

Candidate-California Congress (CA 33)

local or state legally qualified candidate	<b>Federal Candidate</b>	Issue Advocacy, Other Non- Candidate
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5. PRODUCT OR CATEGORY: (circle or highlight)

6. POLITICAL PARTY OR OFFICIAL AFFILIATION:

Independent

7. DATE OF REQUEST

8/21/12

8. NATURE OF REQUEST:

Granted

(a) Request for Legally Qualified Candidate

**X**

(b) Request for ISSUE card

(c) Other request or notes as stated below

Requesting political rate card all dayparts, all programs, all levels rates :30's.

9. DISPOSITION MADE OF REQUEST

(a) Granted

**X**

(b) Denied (reason)

(c) Withdrawn (reason)

(d) Avails offered

**X**

10. SUBSEQUENT DEVELOPMENTS

See File

11. AMOUNT OF CHARGES – see order (s) under candidate name in public file folder. If appropriate. Please note that local/state issues that are not related to matters of national significance, the support or opposition of a FEDERAL CANDIDATE or national interest will include this POLITICAL FORM and DISCLOSURE information, sans orders not required for file. Please contact the Political Specialist for additional inquiry.

**CBS EMPLOYEE COMPLETING FORM**

Signature: \_\_\_\_\_

name typed: \_\_\_\_\_

completing form: \_\_\_\_\_

Cheryl Ciccone, KCBS Political Specialist

Zak Pflieger for Cheryl Ciccone, 11/15/12